

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006794

FILED
Mar 24, 2012
Secretary of State

Entity Name: GOD HOUSE OF DIVINE POWER INC.

Current Principal Place of Business:

4002 LEE ST
N/A
JACKSONVILLE, FL 32209

New Principal Place of Business:

Current Mailing Address:

4002 LEE ST
N/A
JACKSONVILLE, FL 32209

New Mailing Address:

FEI Number: 45-0486517

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COMER, KATHERINE PASTOR
4002 LEE STREET
N/A
JACKSONVILLE, FL 32209 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: E
Name: FREEMAN, JANETTE P
Address: 2326 MCQUADE STREET
City-St-Zip: JACKSONVILLE, FL 32203

Title: MN
Name: SPIKES, MARVETTE
Address: 2081 CHAFFEE ROAD LOT #36
City-St-Zip: JACKSONVILLE, FL 32221

Title: T
Name: MCBRIDE, VICKIE
Address: 2020 WELLS ROAD APT 18C
City-St-Zip: ORANGE PARK, FL 32073

Title: P
Name: COMER, KATHERINE J PASTOR
Address: 5224 BLAND RD
City-St-Zip: JACKSONVILLE, FL 32254

Title: MN
Name: COMER, OTIS L JR.
Address: 3403 MARLO STREET
City-St-Zip: JACKSONVILLE, FL 32209

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: VICKIE MCBRIDE

T

03/24/2012

Electronic Signature of Signing Officer or Director

Date